

Information that MUST be on Free and Reduced Price (F/RP) Meal Application Materials

Letter to Households (Frequently Asked Questions) with Specific Information Required:			
<input type="checkbox"/> The following students are eligible for free meals: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Students residing in household that receives SNAP benefits <input type="checkbox"/> Foster children that are responsibility of foster care agency or court </div> <div> <input type="checkbox"/> Head Start enrollee <input type="checkbox"/> Runaway </div> <div> <input type="checkbox"/> Homeless <input type="checkbox"/> Migrant </div> </div>			
<input type="checkbox"/> Reduced Price Income Eligibility Guidelines ONLY		<input type="checkbox"/> Who to contact at district if believe student is homeless, migrant or runaway	
<input type="checkbox"/> Complete one application per household		<input type="checkbox"/> How to apply online if that is an option for the district and how to obtain a paper application of don't want to apply online	
<input type="checkbox"/> If approved last year still need new determination this year (application, etc.)		<input type="checkbox"/> If get WIC must complete application to make F/RP determination	
<input type="checkbox"/> Information submitted by household may be checked or verified		<input type="checkbox"/> If don't qualify now but do later in school year complete an application then	
<input type="checkbox"/> If disagree with F/RP determination may request hearing <input type="checkbox"/> Supply hearing official contact information		<input type="checkbox"/> US Citizenship is not a requirement for F/RP determination	
<input type="checkbox"/> How to determine income to put on application if not the same each month		<input type="checkbox"/> How to indicate if someone in household has no income	
<input type="checkbox"/> How to report military income		<input type="checkbox"/> What to do if application does not have enough space for all family members	
<input type="checkbox"/> State hotline number if household needs additional assistance such as SNAP		<input type="checkbox"/> Contact information for determining official if there are questions	
Instructions on How to Apply for F/RP Benefits			
<input type="checkbox"/> List all children that are part of household		<input type="checkbox"/> Is the child listed a student at this district	
<input type="checkbox"/> Is the child: <input type="checkbox"/> Foster <input type="checkbox"/> Homeless <input type="checkbox"/> Migrant <input type="checkbox"/> Runaway		<input type="checkbox"/> Does the household participate in SNAP Program <input type="checkbox"/> Abbreviated application <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Complete student name(s) <input type="checkbox"/> Supply SNAP case number or identifier <input type="checkbox"/> No Social Security Number required <input type="checkbox"/> Signed by adult household member </div> <div> <input type="checkbox"/> Check "Yes" to receive SNAP benefits question <input type="checkbox"/> No income information <input type="checkbox"/> No other household members need to be listed </div> </div>	
<input type="checkbox"/> For income applications	<input type="checkbox"/> Children's Income <input type="checkbox"/> Report children's income <input type="checkbox"/> Define children's income <input type="checkbox"/> Include sources of income for children list	<input type="checkbox"/> Adult's Income <input type="checkbox"/> Who is considered a household member <input type="checkbox"/> List all adults considered a household member <input type="checkbox"/> Report all income in gross amounts <input type="checkbox"/> Write zero if no income <div style="margin-left: 20px;"><input type="checkbox"/> If no income listed and no zero it is a positive indication of zero income</div> <input type="checkbox"/> How often is each income listed received <input type="checkbox"/> Include sources of income for adults listed	
<input type="checkbox"/> Must include last four digits of Social Security Number of check box that have no Social Security Number		<input type="checkbox"/> Must include space for household to complete the number of household members (new 2017-18)	<input type="checkbox"/> Adult household member must sign application

Paper or Scanned Applications			
<input type="checkbox"/> Space to list all children infant through grade 12	<input type="checkbox"/> Indication if the children listed are students at this school district	<input type="checkbox"/> Indication if the child or children are foster	<input type="checkbox"/> Indication if the child or children are homeless, migrant or runaway
<input type="checkbox"/> Ask if household receives SNAP benefits (do not include TANF or FDPIR) <input type="checkbox"/> If yes, provide SNAP case number or identifier (not 16 digit EBT card number) <input type="checkbox"/> If yes, include instructions there is no need to complete income information for household members		<input type="checkbox"/> Report child income	<input type="checkbox"/> List all adult household members <input type="checkbox"/> Indicate each adult's income <input type="checkbox"/> Income source (work, public assistance, etc.) <input type="checkbox"/> Income frequency <input type="checkbox"/> Income may be in whole dollar amounts
<input type="checkbox"/> Indicate number of household members		<input type="checkbox"/> Indicate last four digits of adult social security number or indicate the adult has no social security number	
<input type="checkbox"/> Attestation Statement <input type="checkbox"/> promise information on application is true and that all income is reported <input type="checkbox"/> understand the information is given in connection with receipt of Federal funds <input type="checkbox"/> understand that school officials may verify or check the information provided <input type="checkbox"/> aware that if purposely give false information child may lose meal benefits <input type="checkbox"/> aware that if purposely give false information adult may be prosecuted under applicable state and Federal Laws <input type="checkbox"/> provide place for adult to sign application		<input type="checkbox"/> Request children's racial and ethnic identities <input type="checkbox"/> Include instructions race/ethnicity is optional for household to complete <input type="checkbox"/> Categories for ethnicity are: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Categories for race are: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
<input type="checkbox"/> Use of Information Statement (updated in July 2017)	<input type="checkbox"/> Non-Discrimination Statement (updated in October 2015)		<input type="checkbox"/> Disclosure Statement is optional (share information to ArKids 1st)
<input type="checkbox"/> Determination Information <input type="checkbox"/> How F/RP benefits were determined <input type="checkbox"/> Income and household size <input type="checkbox"/> SNAP <input type="checkbox"/> Other categorically eligible <input type="checkbox"/> Eligibility Determination <input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Denied (reason for denial) _____			<input type="checkbox"/> Determining Official Signature or Initials
For Electronic (web-based, on-line) F/RP Meal Benefits application In addition to the information required on paper F/RP benefits documents:			
<input type="checkbox"/> Include instructions on how to get a paper application			
<input type="checkbox"/> If asking for information that is not REQUIRED, must indicate it is not required - for example: <input type="checkbox"/> Grade <input type="checkbox"/> School name <input type="checkbox"/> Birthday <input type="checkbox"/> Student ID number			
<input type="checkbox"/> Must be able to indicate if: <input type="checkbox"/> SNAP household <input type="checkbox"/> do not include TANF <input type="checkbox"/> do not include FDPIR <input type="checkbox"/> Foster <input type="checkbox"/> Homeless <input type="checkbox"/> Runaway <input type="checkbox"/> Migrant <input type="checkbox"/> Head Start			
<input type="checkbox"/> Should be able to accept income in whole dollar amounts			